TOBACCO OUTLET INSPECTION FORM
Indiana Family and Social Services Administration
Division of Mental Health and Addiction

Tobacco outlet address:

Sample outlet name
Sample outlet address
Anytown, IN 46220

317-255-1234   ID#: ##-##-##

Name/address correction(s):

Tobacco outlet status:

1. Out of business

2. Does not sell tobacco

3. Inaccessible to juveniles (liquor store, bar or other adult entertainment)

4. Inspectable tobacco outlet

INSPECTION RESULTS

Date of Inspection: _____ - _____ - 2014

Time of Inspection: _____ - _____ AM   PM

Clerk reaction:

    1. Willing to sell

    2. Sale refused

Clerk's gender: 1. Male   2. Female

Clerk's apparent age:

1. Under 18	3. 27 - 45
2. 18 - 26	4. Over 45

Youth gender: 1. Male 2. Female   Youth age: 14   15   16

Officer name: ID No.:   District:

Notes: